



08-23-00

GAM 23/000

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

RECEIVED
AUG 21 2000**CONTINUED PROSECUTION APPLICATION (CPA)
REQUEST TRANSMITTAL**

TC 2700 MAIL ROOM

Submit an original, and a duplicate for fee processing.

CHECK BOX, if applicable:

(Only for Continuation or Divisional applications under 37 C.F.R. § 1.53(d))

☐ DUPLICATE

Address to:

Assistant Commissioner for Patents
Box CPA
Washington, DC 20231Attorney Docket No.
of Prior Application

EFIM0210

First Named Inventor

Zloter et al.

Examiner Name

Shankar

Group / Art Unit

2778

Express Mail Label No.

EL556465454US

This is a request for a ☐ continuation or ☐ divisional application under 37 C.F.R. § 1.53(d),
(continued prosecution application (CPA)) of prior application number 09 / 150,251,
filed on 9/10/98, entitled Systems and Processing Algorithms for Ultrasound Time-of-Flight...

NOTES

FILING QUALIFICATIONS: The prior application identified above must be a nonprovisional application that is either: (1) complete as defined by 37 C.F.R. § 1.51(b), or (2) the national stage of an international application in compliance with 35 U.S.C. 371.

A Notice will be placed on a patent issuing from a CPA, except for reissues and designs, to the effect that the patent issued on a CPA and is subject to the twenty-year patent term provisions of 35 U.S.C. § 154(a)(2). Therefore, the prior application of a CPA may have been filed before, on or after June 8, 1995.

C-I-P NOT PERMITTED: A continuation-in-part application cannot be filed as a CPA under 37 C.F.R. § 1.53(d), but must be filed under 37 C.F.R. § 1.53(b).

EXPRESS ABANDONMENT OF PRIOR APPLICATION: The filing of this CPA is a request to expressly abandon the prior application as of the filing date of the request for a CPA. 37 C.F.R. § 1.53(b) must be used to file a continuation, divisional, or continuation-in-part of an application that is not to be abandoned.

ACCESS TO PRIOR APPLICATION: The filing of this CPA will be construed to include a waiver of confidentiality by the applicant under 35 U.S.C. 122 to the extent that any member of the public who is entitled under the provisions of 37 C.F.R. § 1.14 to access to, copies of, or information concerning, the prior application may be given similar access to, copies of, or similar information concerning, the other application or applications in the file jacket.

35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prior application is needed in the first sentence of the specification and none should be submitted. If a sentence referencing the prior application is submitted, it will not be entered. A request for a CPA is the specific reference required by 35 U.S.C. 120 and to every application assigned the application number identified in such request, 37 C.F.R. § 1.78(a).

1. ☐ Enter the unentered amendment previously filed on _____
under 37 C.F.R. § 1.116 in the prior nonprovisional application.
2. ☒ A preliminary amendment is enclosed.
3. This application is filed by fewer than all the inventors named in the prior application, 37 C.F.R. § 1.53 (d)(4).
 - a. ☐ **DELETE** the following inventor(s) named in the prior nonprovisional application:
.....
 - b. ☐ The inventor(s) to be deleted are set forth on a separate sheet attached hereto.
4. ☐ A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.
5. Information Disclosure Statement (IDS) is enclosed:
 - a. ☐ PTO-1449
 - b. ☐ Copies of IDS Citations

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

08/24/2000 UMAN11 00000126 050770 09150251
690.00 CH
01 FC:131

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
TOTAL CLAIMS (37 C.F.R. § 1.16(c) or (j))	3	-20* =	0	x \$ 9.00 =	\$ 0.00
INDEPENDENT CLAIMS (37 C.F.R. § 1.16(b) or (i))	1	-3** =	0	x \$ 39.00 =	0.00
MULTIPLE DEPENDENT CLAIMS (if applicable)(37 C.F.R. § 1.16(d))				+ \$ _____ =	
				BASIC FEE (37 C.F.R. § 1.16)	690.00
				Total of above Calculations =	690.00
Reduction by 50% for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27 & 1.28).					
* Reissue claims in excess of 20 and over original patent. ** Reissue independent claims over original patent.					TOTAL = 690.00

6. Small entity status:

- a. ☐ A small entity statement is enclosed, if (b) and (c) do not apply.
 b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
 c. ☐ Is no longer claimed.

7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 05 - 0770:

- a. ☒ Fees required under 37 C.F.R. § 1.16.
 b. ☒ Fees required under 37 C.F.R. § 1.17.
 c. ☐ Fees required under 37 C.F.R. § 1.18.

8. ☐ A check in the amount of \$ _____ is enclosed.9. ☒ New Attorney Docket Number, if desired EFIM0210CPA

[Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.]

10. a. ☐ Receipt For Facsimile Transmitted CPA (PTO/SB/29A)

- b.
- ☒
- Return Receipt Postcard (Should be specifically itemized, See MPEP 503)

11. ☐ Other: _____**NOTE:**

The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.

12. NEW CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

22862

or ☐ New correspondence address below

(Insert Customer No. or Attach bar code label here)

Name

Address

City

State

Zip Code

Country

Telephone

Fax

13. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)

Michael A. Glenn

Signature



Registration No. (Attorney/Agent)

30,176

Date

8/22/2000